

**DIRECTOR'S ANNUAL REPORT
SPECIAL EDUCATION OPTIONS BY PRIMARY AND SECONDARY
AVERAGE DAILY MEMBERSHIP
BY SCHOOL AND DISTRICT**

- This report should include **all** special education students (ages 0-21) served by your district.
- Beginning Period - This is the beginning report period, for the annual report this should be "1".
- End Period - This is the ending report period, for the annual report this should be "9".
- Calculate **Primary Option ADM** by totaling the number of Days Enrolled, in which the student was enrolled in a Special Education Primary Option, for the report period and divide by the report days for the specified report period. This student will be a **maximum of 1 Primary Option ADM**. **If a student changes options during a report period, the portion of ADM must be reflected in each option during the report period.**
- Calculate **Secondary Option ADM** by totaling the number of Days Enrolled, in which the student was enrolled in a Special Education Secondary Option, for the report period and divide by the report days for the specified report period. This student will be a **maximum of 1 Secondary Option ADM**. **If a student changes options during a report period, the portion of ADM must be reflected in each option during the report period.**
- **Services provided students from a *private school or institution*:**
The district providing the special education services will be credited.
The district must maintain a daily attendance record on these students.
- **Services provided to a student *from another public school or district*:**
The student's attendance should be kept at the primary school (**home school**) and reported by the primary school.

NOTE: SUBMIT THIS REPORT FROM THE D & A CENSUS PROGRAM

- Refer to the **Student Membership and Attendance Accountability Manual** for further definitions and general reporting requirements.

NOTE: SUBMIT THE SPECIAL EDUCATION OPTIONS BY PRIMARY AND SECONDARY REPORT ONLY FROM THE D & A CENSUS PROGRAM.

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District _____ District No. _____ Prepared by: _____ Phone: (____) _____ - _____
School _____ School No. _____ Date _____ Beginning Period _____ Ending Period _____

Special Education Options	Primary Options	Secondary Options	Total Primary & Secondary Options
	ADM	ADM	ADM
OPTION 1			
OPTION 2			
OPTION 3			
OPTION 4			
OPTION 5			
OPTION 6			
OPTION 7			
OPTION 8			
OPTION 9			
OPTION 10			
Grand Total			

ED-1861 (REV 4/00)